

**Fill in this information to identify your case:**

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ <b>628,444.00</b>
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ <b>135,530.16</b>
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ <b>763,974.16</b>

#### Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	<b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ <b>1,412,164.36</b>
3.	<b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ <b>165,214.54</b>
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ <b>101,200.02</b>
<b>Your total liabilities</b>		\$ <b>1,678,578.92</b>

#### Part 3: Summarize Your Income and Expenses

4.	<b>Schedule I: Your Income</b> (Official Form 106I) Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ <b>18,979.62</b>
5.	<b>Schedule J: Your Expenses</b> (Official Form 106J) Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ <b>18,972.72</b>

#### Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**  
☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes
7. **What kind of debt do you have?**  
☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ \_\_\_\_\_

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
<b>From Part 4 on Schedule E/F, copy the following:</b>	
9a. Domestic support obligations (Copy line 6a.)	\$ <b>0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <b>165,214.54</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <b>0.00</b>
9d. Student loans. (Copy line 6f.)	\$ <b>0.00</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <b>0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <b>0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <b>165,214.54</b>

Fill in this information to identify your case and this filing:

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number **18-02131/hb**

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

**4523 Hwy 246 North**

Street address, if available, or other description

**Hodges** **SC** **29653-0000**  
City State ZIP Code

**Greenwood**  
County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<b>\$300,000.00</b>	<b>\$300,000.00</b>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee simple**

☐ Check if this is community property (see instructions)

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

**If you own or have more than one, list here:**

1.2

**418 Henrietta Ave E**

Street address, if available, or other description

**Greenwood SC 29649-0000**

City State ZIP Code

**Greenwood**

County

**What is the property?** Check all that apply

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$60,000.00**

**Current value of the portion you own?**

**\$60,000.00**

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Fee simple**

☐ **Check if this is community property**  
(see instructions)

**If you own or have more than one, list here:**

1.3

**Crystal Bay Drive**

Street address, if available, or other description

**Laurens SC 29360-0000**

City State ZIP Code

**Laurens**

County

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

**Lot 25 Sec 11 Cyrstal Bay**

**\*Debtor sold property 15 years ago. However, title was never transferred to buyer.**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$54,000.00**

**Current value of the portion you own?**

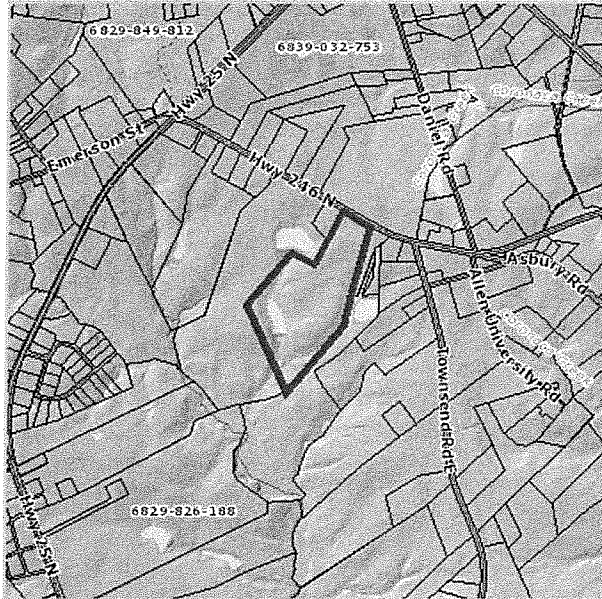
**\$54,000.00**

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

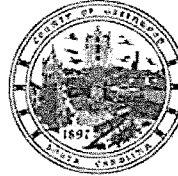
**Fee simple**

☐ **Check if this is community property**  
(see instructions)

Greenwood County, SC - Property Report <a href="#">Convert to PDF</a> 5/7/2018		
Parcel ID	Property Address	Description
6839-014-446	4523 Hwy 246 N	TRS A&C (34.6 AC)



Owner Information	
Owner Name	JOSEPH JAMES A
Mailing Address	4523 HIGHWAY 246 N
City, State Zip	HODGES, SC 29653-9705



Mobile  
Maps and  
Information



*Disclaimer:* Map and parcel data are believed to be accurate, but accuracy is not guaranteed. This is not a legal document and should not be substituted for a title search, appraisal, survey, or for zoning verification.

Parcel Information					
Subdivision	FEMA LOMA	On Lake Gwd	Deed	Plat	Purchase Date
	No	No	<u>383-632</u>	<u>28-105</u>	7/29/1993

Improvements						
Year Built	Square Ft	Bedrooms	Bathrooms	Half Baths	Fin Bsmt SqFt	Unfin Bsmt SqFt
1977	4,449	0	0	0	0	0

Assessor Information			
Appraised by	Tax District	Tax Exempt	Assessed Value
County	6-Greenwood Metro		7620

Assessor Valuation		
Tax Value - Land	Cap Value - Land	Fair Market Value - Land
\$121,100	\$139,300	\$121,100
Tax Value - Improvements	Cap Value - Improvements	Fair Market Value - Improv.
\$178,900	\$226,400	\$178,900
Tax Value - Total	Cap Value - Total	Fair Market Value - Total
\$300,000	\$365,700	\$300,000

Recent Sales							
Seller Name	Buyer Name	Sale Date	Sale Type	Sale Price	Description	Deed	Plat
Banks Edith A/boyce M	Joseph James A	7/29/1993	Valid Sale	\$240,000	TRS A&C (34.6 AC)	383- 632	28- 105

Assessor Valuation		
Tax Value - Land	Cap Value - Land	Fair Market Value - Land
\$25,000	\$15,900	\$25,000
Tax Value - Improvements	Cap Value - Improvements	Fair Market Value - Improv.
\$35,000	\$48,700	\$35,000
Tax Value - Total	Cap Value - Total	Fair Market Value - Total
\$60,000	\$64,600	\$60,000

[HOME](#)[FIND IT HERE](#)[CITIZEN SERVICES](#)[COUNTY GOVERNMENT](#)*South Carolina*

## Property Search - Assessor

[Home](#) >> [Property Search - Assessor](#)

## Assessor Record Information

[Search Additional Records](#)[View GIS Data](#)

## Owner Information

Tax Map No.: 401-00-00-046-----  
Name: JOSEPH JAMES A  
Address: 4523 HWY 246 NORTH  
City, State, Zip: HODGES S C 29653

## Address Information

Physical Address:  
Land Use: R  
District Code: 56  
Town Code:  
Fire Code: D121  
Homestead Percent:

## Property Legal

Description: LOT 25 SEC II CRYSTAL BAY  
Extra Description: (401-21) LN

## Sales History

Date of Sale: 04-26-96  
Consideration: 00084650  
Deed of Book: 357 Deed Book Pg. No: 260  
Plat Book: A130 Plat Book Pg. No.: 8-9

Previous Owner: SOUTHEASTERN LAND SALES INC  
Previous Deed Book: Previous Deed Book Pg No:  
Previous Owner #2:  
Previous Deed Book2: Previous Deed Book Pg No #2:

## Assessment Information

	Class Code	Total Lots	Total Acres	Total Improvements	Land Appraisal	Land Assessment	Building Appraisal	Building Assessment	Total Assessment
Class 1	LN	1	0	0	\$54,000.00	3240	\$0.00	0	\$3,240.00
Class 2		0	0	0	\$0.00	0	\$0.00	0	\$0.00
Class 3		0	0	0	\$0.00	0	\$0.00	0	\$0.00
Class 4		0	0	0	\$0.00	0	\$0.00	0	\$0.00
Class 5		0	0	0	\$0.00	0	\$0.00	0	\$0.00
Total Value		1	0	0	\$54,000.00	3240	\$0.00	0	\$3,240.00
Market Value		1	0	0	\$54,000.00	0	\$0.00	0	\$0.00

[Search Additional Records](#)

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

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**If you own or have more than one, list here:**

1.4

**101 Joy O**

Street address, if available, or other description

**Hartwell GA 30643-0000**

City State ZIP Code

**Hart**

County

**What is the property?** Check all that apply

- ☐ Single-family home  
☒ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

**Ross Wylie SD LT E PB 31-45 Lt. 2.45**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$214,444.00**

**Current value of the portion you own?**

**\$214,444.00**

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Fee simple**

☐ **Check if this is community property** (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$628,444.00**

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No

☒ Yes

3.1 Make: **Kia**  
Model: **Soul**  
Year: **2011**  
Approximate mileage: **160,000**  
Other information:

**VIN# KNDJT2A26B7216663**  
**Location: 4523 Highway 246**  
**North, Hodges SC 29653**

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$2,500.00**

**Current value of the portion you own?**

**\$2,500.00**

3.2 Make: **Ford**  
Model: **Excursion**  
Year: **2003**  
Approximate mileage: **160,000**  
Other information:

**VIN# 1FMNU42S93EC07795**  
**Location: 4523 Highway 246**  
**North, Hodges SC 29653**

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**\$3,250.00**

**Current value of the portion you own?**

**\$3,250.00**



Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

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3.3 Make: **Ford**  
Model: **F150**  
Year: **1999**  
Approximate mileage: **150,000**  
Other information:

**Location: 4523 Highway 246  
North, Hodges SC 29653**

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$1,075.00**

**\$1,075.00**

3.4 Make: **Nissan**  
Model: **Rogue**  
Year: **2018**  
Approximate mileage:  
Other information:

**Location: 4523 Highway 246  
North, Hodges SC 29653**

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$23,115.00**

**\$23,115.00**

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☐ No

☒ Yes

4.1 Make: **Alfa**  
Model: **See-Ya M-40FD 350hp**  
Year: **2005**  
Other information:

**\*slide out broken  
Location: 4523 Highway 246  
North, Hodges SC 29653**

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$68,700.00**

**\$68,700.00**

4.2 Make: **Crest**  
Model: **Pontoon**  
Year: **1996**  
Other information:

**includes motor & trailer  
\*motor blown  
Location: 4523 Highway 246  
North, Hodges SC 29653**

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

**\$1,000.00**

**\$1,000.00**

**5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>**

**\$99,640.00**

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

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Debtor 2 **Linda Joseph**

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<b>Furniture, Appliances, Kitchenware, Linens</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$600.00</b>
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<b>Riding lawn mower &amp; yard tools</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$600.00</b>
---	-----------------

<b>JD 790 Tractor with front-end loader</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$2,000.00</b>
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<b>Bushhog</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$500.00</b>
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**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

<b>3 TVs, 2 DVD Players, 2 Computers, 2 Cell Phones</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$800.00</b>
---	-----------------

<b>40 year old upright piano</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$75.00</b>
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**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe.....

<b>Smith &amp; Wesson .38</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$500.00</b>
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<b>Ruger .380</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$500.00</b>
---	-----------------

<b>KalTec PII 9mm</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$250.00</b>
---	-----------------

<b>50 rounds of ammunition &amp; gun safe</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b>	<b>\$200.00</b>
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**11. Clothes**

*Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories*

☐ No

☒ Yes. Describe.....

**Clothing & Personal Items**  
**Location: 4523 Highway 246 North, Hodges SC 29653**

**\$2,000.00**

**12. Jewelry**

*Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver*

☐ No

☒ Yes. Describe.....

**Seiko watch & wedding band**  
**Location: 4523 Highway 246 North, Hodges SC 29653**

**\$200.00**

**Wedding Band, Diamond Ring & Costume Jewelry**  
**Location: 4523 Highway 246 North, Hodges SC 29653**

**\$5,000.00**

**13. Non-farm animals**

*Examples: Dogs, cats, birds, horses*

☐ No

☒ Yes. Describe.....

**Yorkshire Terrier**  
**Location: 4523 Highway 246 North, Hodges SC 29653**

**\$0.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$13,225.00**

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition*

☒ No

☐ Yes.....

**17. Deposits of money**

*Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.*

☐ No

☒ Yes.....

Institution name:

**17.1. Checking Account #8795**

**Wells Fargo**

**\$374.60**

**17.2. Checking Account Wells Fargo**

**\$800.00**

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**18. Bonds, mutual funds, or publicly traded stocks**

*Examples: Bond funds, investment accounts with brokerage firms, money market accounts*

☒ No

☐ Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans*

☒ No

☐ Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others*

☒ No

☐ Yes. ....

Institution name or individual:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☐ No

☒ Yes.....

Issuer name and description.

**Thrivant Financial**

**\$1,015.65**

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*

☒ No

☐ Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*

☒ No

☐ Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the  
portion you own?**  
Do not deduct secured  
claims or exemptions.

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No  
☐ Yes. Give specific information.....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No  
☐ Yes. Give specific information..

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☐ No  
☒ Yes. Name the insurance company of each policy and list its value.

Company name:	Beneficiary:	Surrender or refund value:
<b>Thrivent MCA whole life (has \$80,000 loan on policy)</b>	<b>Linda Joseph</b>	<b>\$19,824.91</b>
<b>Transpremier Life *term life insurance</b>	<b>burial</b>	<b>\$0.00</b>

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No  
☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$22,015.16**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☐ No. Go to Part 6.  
☒ Yes. Go to line 38.

**Current value of the  
portion you own?**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

- ☒ No  
☐ Yes. Describe.....

39. **Office equipment, furnishings, and supplies**

*Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices*

- ☐ No  
☒ Yes. Describe.....

**Computer & software**

**\$400.00**

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ☒ No  
☐ Yes. Describe.....

41. **Inventory**

- ☒ No  
☐ Yes. Describe.....

42. **Interests in partnerships or joint ventures**

- ☐ No  
☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**Georgia Anesthesia Services, LLC**  
**\*corporation to limit malpractice & tax liability -**  
**no assets**

**25** %

**\$0.00**

43. **Customer lists, mailing lists, or other compilations**

- ☒ No.  
☐ Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☒ No  
☐ Yes. Describe.....

44. **Any business-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.....

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

**\$400.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☐ No. Go to Part 7.  
☒ Yes. Go to line 47.

**Current value of the**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

**portion you own?**  
Do not deduct secured claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

- ☐ No  
☒ Yes.....

**chickens & chicken coop**  
**Location: 4523 Highway 246 North, Hodges SC 29653**

**\$250.00**

**48. Crops—either growing or harvested**

- ☒ No  
☐ Yes. Give specific information.....

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No  
☐ Yes.....

**50. Farm and fishing supplies, chemicals, and feed**

- ☒ No  
☐ Yes.....

**51. Any farm- and commercial fishing-related property you did not already list**

- ☒ No  
☐ Yes. Give specific information.....

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here .....**

**\$250.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

- ☒ No  
☐ Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

**\$0.00**

**Part 8: List the Totals of Each Part of this Form**

<b>55. Part 1: Total real estate, line 2 .....</b>		<b>\$628,444.00</b>
<b>56. Part 2: Total vehicles, line 5</b>	<b>\$99,640.00</b>	
<b>57. Part 3: Total personal and household items, line 15</b>	<b>\$13,225.00</b>	
<b>58. Part 4: Total financial assets, line 36</b>	<b>\$22,015.16</b>	
<b>59. Part 5: Total business-related property, line 45</b>	<b>\$400.00</b>	
<b>60. Part 6: Total farm- and fishing-related property, line 52</b>	<b>\$250.00</b>	
<b>61. Part 7: Total other property not listed, line 54</b>	<b>+ \$0.00</b>	
<b>62. Total personal property. Add lines 56 through 61...</b>	<b>\$135,530.16</b>	<b>Copy personal property total \$135,530.16</b>
<b>63. Total of all property on Schedule A/B. Add line 55 + line 62</b>		<b>\$763,974.16</b>

## Fill in this information to identify your case:

Debtor 1	<b>James Alvin Joseph</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Linda Joseph</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)	<b>18-02131/hb</b>		

☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
2003 Ford Excursion 160,000 miles VIN# 1FMNU42S93EC07795 Location: 4523 Highway 246 North, Hodges SC 29653 Line from <i>Schedule A/B</i> : 3.2	\$3,250.00	<input checked="" type="checkbox"/> \$3,250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(2) husband's exemption
2018 Nissan Rogue Location: 4523 Highway 246 North, Hodges SC 29653 Line from <i>Schedule A/B</i> : 3.4	\$23,115.00	<input checked="" type="checkbox"/> \$2,007.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(2) wife's exemption
Furniture, Appliances, Kitchenware, Linens Location: 4523 Highway 246 North, Hodges SC 29653 Line from <i>Schedule A/B</i> : 6.1	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3) joint exemption
Riding lawn mower & yard tools Location: 4523 Highway 246 North, Hodges SC 29653 Line from <i>Schedule A/B</i> : 6.2	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3) joint exemption
JD 790 Tractor with front-end loader Location: 4523 Highway 246 North, Hodges SC 29653 Line from <i>Schedule A/B</i> : 6.3	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3) joint exemption



Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Bushhog</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>6.4</b>	<b>\$500.00</b>	<input checked="" type="checkbox"/> <b>\$500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(3) joint exemption</b>
<b>3 TVs, 2 DVD Players, 2 Computers, 2 Cell Phones</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>7.1</b>	<b>\$800.00</b>	<input checked="" type="checkbox"/> <b>\$800.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(3) joint exemption</b>
<b>40 year old upright piano</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>7.2</b>	<b>\$75.00</b>	<input checked="" type="checkbox"/> <b>\$75.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(3) joint exemption</b>
<b>Smith &amp; Wesson .38</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>10.1</b>	<b>\$500.00</b>	<input checked="" type="checkbox"/> <b>\$500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(15) husband's exemption</b>
<b>Ruger .380</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>10.2</b>	<b>\$500.00</b>	<input checked="" type="checkbox"/> <b>\$500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(15) husband's exemption</b>
<b>KalTec PII 9mm</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>10.3</b>	<b>\$250.00</b>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(15) husband's exemption</b>
<b>Clothing &amp; Personal Items</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>11.1</b>	<b>\$2,000.00</b>	<input checked="" type="checkbox"/> <b>\$2,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(3) joint exemption</b>
<b>Seiko watch &amp; wedding band</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>12.1</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(4) husband's exemption</b>
<b>Wedding Band, Diamond Ring &amp; Costume Jewelry</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>12.2</b>	<b>\$5,000.00</b>	<input checked="" type="checkbox"/> <b>\$1,175.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(4) wife's exemption</b>
<b>Wedding Band, Diamond Ring &amp; Costume Jewelry</b> <b>Location: 4523 Highway 246 North, Hodges SC 29653</b> Line from Schedule A/B: <b>12.2</b>	<b>\$5,000.00</b>	<input checked="" type="checkbox"/> <b>\$3,825.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(7) wife's exemption - unused portion of 15-41-30(A)(5)</b>
<b>Checking Account #8795: Wells Fargo</b> Line from Schedule A/B: <b>17.1</b>	<b>\$374.60</b>	<input checked="" type="checkbox"/> <b>\$374.60</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(5) husband's exemption</b>

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Checking Account: Wells Fargo</b> Line from Schedule A/B: <b>17.2</b>	<b>\$800.00</b>	<input checked="" type="checkbox"/> <b>\$800.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(5) wife's exemption</b>
<b>Thrivant Financial</b> Line from Schedule A/B: <b>23.1</b>	<b>\$1,015.65</b>	<input checked="" type="checkbox"/> <b>\$1,015.65</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(13)</b>
<b>Thrivent MCA whole life (has \$80,000 loan on policy)</b> <b>Beneficiary: Linda Joseph</b> Line from Schedule A/B: <b>31.1</b>	<b>\$19,824.91</b>	<input checked="" type="checkbox"/> <b>\$4,725.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(9) husband's exemption</b>
<b>Thrivent MCA whole life (has \$80,000 loan on policy)</b> <b>Beneficiary: Linda Joseph</b> Line from Schedule A/B: <b>31.1</b>	<b>\$19,824.91</b>	<input checked="" type="checkbox"/> <b>\$5,525.40</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(5) husband's exemption</b>
<b>Thrivent MCA whole life (has \$80,000 loan on policy)</b> <b>Beneficiary: Linda Joseph</b> Line from Schedule A/B: <b>31.1</b>	<b>\$19,824.91</b>	<input checked="" type="checkbox"/> <b>\$5,900.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(7) husband's exemption - unused portion of 15-41-30(A)(2), (3), (4) &amp; (6)</b>
<b>Computer &amp; software</b> Line from Schedule A/B: <b>39.1</b>	<b>\$400.00</b>	<input checked="" type="checkbox"/> <b>\$400.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>S.C. Code Ann. § 15-41-30(A)(6)</b>

3. **Are you claiming a homestead exemption of more than \$160,375?**  
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

**Fill in this information to identify your case:**

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<b>2.1 IRS</b> <small>Creditor's Name</small>  <b>PO Box 7346</b> <b>Philadelphia, PA</b> <b>19101-7346</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>\$851,479.79</b>	<b>\$763,974.16</b>	<b>\$0.00</b>
<b>Describe the property that secures the claim:</b> <div style="border: 1px solid black; padding: 5px;">all property</div>			
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit			
<input checked="" type="checkbox"/> Other (including a right to offset) <b>Tax Liens</b>			
<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
<b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____			

<b>2.2 Nmac</b> <small>Creditor's Name</small>  <b>Attn: Bankruptcy</b> <b>Po Box 660360</b> <b>Dallas, TX 75266</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>\$21,108.00</b>	<b>\$23,115.00</b>	<b>\$0.00</b>
<b>Describe the property that secures the claim:</b> <div style="border: 1px solid black; padding: 5px;">2018 Nissan Rogue</div>			
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit			
<input checked="" type="checkbox"/> Other (including a right to offset) <b>First Lien</b>			
<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			

Debtor 1 **James Alvin Joseph** Case number (if know) **18-02131/hb**  
 First Name Middle Name Last Name  
 Debtor 2 **Linda Joseph**  
 First Name Middle Name Last Name

**Opened**  
**06/17 Last**  
**Active**  
 Date debt was incurred **3/08/18** Last 4 digits of account number **0001**

**2.3 SC DEPT OF REVENUE** Describe the property that secures the claim: **\$8,454.57** **\$763,974.16** **\$0.00**  
 Creditor's Name  
**PO BOX 12265**  
**COLUMBIA, SC 29211**  
 Number, Street, City, State & Zip Code  
 Who owes the debt? Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **Tax Liens (2012 income tax)**  
 Date debt was incurred Last 4 digits of account number

**2.4 Synchrony Bank/Lending Inc** Describe the property that secures the claim: **\$108,118.00** **\$68,700.00** **\$39,418.00**  
 Creditor's Name  
**Attn: Bankruptcy**  
**Po Box 965060**  
**Orlando, FL 32896**  
 Number, Street, City, State & Zip Code  
 Who owes the debt? Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **First Lien**  
**Opened**  
**08/04 Last**  
**Active**  
 Date debt was incurred **6/20/16** Last 4 digits of account number **8561**

**2.5 Wells Fargo Bank NA** Describe the property that secures the claim: **\$24,040.00** **\$300,000.00** **\$0.00**  
 Creditor's Name  
**PO Box 10335**  
**Des Moines, IA 50306**  
 Number, Street, City, State & Zip Code  
 Who owes the debt? Check one.  
☐ Debtor 1 only  
☐ Debtor 2 only  
 As of the date you file, the claim is: Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Nature of lien. Check all that apply.  
☐ An agreement you made (such as mortgage or secured car loan)

Debtor 1 **James Alvin Joseph** Case number (if know) **18-02131/hb**  
 First Name Middle Name Last Name  
 Debtor 2 **Linda Joseph**  
 First Name Middle Name Last Name

☒ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit  
☐ Check if this claim relates to a community debt ☒ Other (including a right to offset) **Second Mortgage**

Date debt was incurred Last 4 digits of account number **1998**

**2.6 Wells Fargo Bank NA** Describe the property that secures the claim: **\$147,842.00** **\$214,444.00** **\$0.00**  
 Creditor's Name  
**101 Joy O Hartwell, GA 30643 Hart County**  
**Ross Wylie SD LT E PB 31-45 Lt. 2.45**  
**PO Box 10335** As of the date you file, the claim is: Check all that apply.  
**Des Moines, IA 50306** ☐ Contingent  
 Number, Street, City, State & Zip Code ☐ Unliquidated  
☐ Disputed  
 Who owes the debt? Check one. **Nature of lien.** Check all that apply.  
☐ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)  
☒ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit  
☐ At least one of the debtors and another ☒ Other (including a right to offset) **First Mortgage**  
☐ Check if this claim relates to a community debt  
 Date debt was incurred Last 4 digits of account number

**2.7 Wells Fargo Home Mortgage** Describe the property that secures the claim: **\$251,122.00** **\$300,000.00** **\$0.00**  
 Creditor's Name  
**Attn: Bankruptcy Mac X7801-014 3476**  
**Stateview Blvd** As of the date you file, the claim is: Check all that apply.  
**Fort Mill, SC 29715** ☐ Contingent  
 Number, Street, City, State & Zip Code ☐ Unliquidated  
☐ Disputed  
 Who owes the debt? Check one. **Nature of lien.** Check all that apply.  
☒ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit  
☐ At least one of the debtors and another ☒ Other (including a right to offset) **First Mortgage**  
☐ Check if this claim relates to a community debt  
**Opened 01/05 Last Active 4/03/18**  
 Date debt was incurred Last 4 digits of account number **5875**

Add the dollar value of your entries in Column A on this page. Write that number here:	<b>\$1,412,164.36</b>
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	<b>\$1,412,164.36</b>

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any

Debtor 1	<b>James Alvin Joseph</b>			Case number (if know)	<b>18-02131/hb</b>
	First Name	Middle Name	Last Name		
Debtor 2	<b>Linda Joseph</b>				
	First Name	Middle Name	Last Name		

debts in Part 1, do not fill out or submit this page.

## Fill in this information to identify your case:

Debtor 1	<b>James Alvin Joseph</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Linda Joseph</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)	18-02131/hb		

☐ Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	<b>IRS</b> Priority Creditor's Name <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify	\$81,983.80	\$61,881.62	\$20,102.18
<b>2013 Income Taxes</b>					

2.2	<b>SC DEPT OF REVENUE</b> Priority Creditor's Name <b>PO BOX 12265</b> <b>COLUMBIA, SC 29211</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify	\$83,230.74	\$83,230.74	\$0.00
<b>2008 - 2014 Income Taxes</b>					

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	<b>Amex</b> Nonpriority Creditor's Name <b>Correspondence</b> <b>Po Box 981540</b> <b>El Paso, TX 79998</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9933</b> When was the debt incurred? <b>Opened 12/92 Last Active 4/22/18</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$3,686.00</b>
4.2	<b>Bank Of America</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 982238</b> <b>El Paso, TX 79998</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5320</b> When was the debt incurred? <b>Opened 05/85 Last Active 11/06/15</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$11,253.00</b>



Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.3	<b>Bank of America</b> Nonpriority Creditor's Name <b>4909 Savarese Circle</b> <b>FI1-908-01-50</b> <b>Tampa, FL 33634</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>1668</b>  When was the debt incurred? <b>Opened 07/03 Last Active 4/11/18</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$7,756.00</b>
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4.4	<b>Bank of America</b> Nonpriority Creditor's Name <b>4909 Savarese Circle</b> <b>FI1-908-01-50</b> <b>Tampa, FL 33634</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>6748</b>  When was the debt incurred? <b>Opened 06/05 Last Active 1/11/16</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$6,600.00</b>
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4.5	<b>Chase Card Services</b> Nonpriority Creditor's Name <b>Correspondence Dept</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>2835</b>  When was the debt incurred? <b>Opened 11/96 Last Active 4/12/18</b>  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$6,198.00</b>
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Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.6	<b>Chase Card Services</b> Nonpriority Creditor's Name <b>Correspondence Dept</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>3198</u>  <b>When was the debt incurred?</b> <u>Opened 11/15 Last Active 3/19/18</u>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$556.00</b>
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4.7	<b>Citicards</b> Nonpriority Creditor's Name <b>Citicorp Credit Services/Attn: Centraliz</b> <b>Po Box 790040</b> <b>Saint Louis, MO 63179</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>3043</u>  <b>When was the debt incurred?</b> <u>Opened 10/93 Last Active 3/06/18</u>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$13,046.00</b>
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4.8	<b>Citicards Cbna</b> Nonpriority Creditor's Name <b>Citi Bank</b> <b>Po Box 6077</b> <b>Sioux Falls, SD 57117</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>7323</u>  <b>When was the debt incurred?</b> <u>Opened 08/85 Last Active 11/05/15</u>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<b>\$6,747.00</b>
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Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.9	<b>Cobb Memorial Hospital</b> Nonpriority Creditor's Name <b>c/o Darnel Quick Recovery, Inc.</b> <b>PO Box 2416</b> <b>Covington, GA 30015</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4382</b> When was the debt incurred? <b>2010</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Services</b>	<b>\$2,307.02</b>
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4.1 0	<b>Credit One Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 98873</b> <b>Las Vegas, NV 89193</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>5164</b> When was the debt incurred? <b>Opened 03/16 Last Active 3/26/18</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$84.00</b>
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4.1 1	<b>Discover Financial</b> Nonpriority Creditor's Name <b>Po Box 3025</b> <b>New Albany, OH 43054</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>9395</b> When was the debt incurred? <b>Opened 7/24/14 Last Active 2/27/18</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$0.00</b>
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Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.1  
2

**First Citizens Bank**

Nonpriority Creditor's Name

**100 E Tryon Rd  
Raleigh, NC 27603**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4908**

**\$20,226.00**

**When was the debt incurred?** **Opened 09/14 Last Active 3/12/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Signature Loan**

4.1  
3

**Synchrony Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **3064**

**\$2,160.00**

**When was the debt incurred?** **Opened 12/12 Last Active 3/12/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Charge Account**

4.1  
4

**Synchrony Bank/ JC Penney**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **9341**

**\$580.00**

**When was the debt incurred?** **Opened 7/01/14 Last Active 3/07/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.1  
5

**Synchrony Bank/ JC Penneys**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965060**  
**Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **0752**

**Unknown**

**When was the debt incurred?** **Opened 09/79 Last Active 9/25/13**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Charge Account**

4.1  
6

**Synchrony Bank/Amazon**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965060**  
**Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$250.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit card**

4.1  
7

**Synchrony Bank/Lowes**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965060**  
**Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **7544**

**\$887.00**

**When was the debt incurred?** **Opened 05/15 Last Active 3/15/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Charge Account**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.1  
8

**Synchrony Bank/Old Navy**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965060**  
**Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **0753**

**\$498.00**

**When was the debt incurred?** **Opened 06/07 Last Active 3/29/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card**

4.1  
9

**Synchrony Bank/Walmart**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept**  
**Po Box 965060**  
**Orlando, FL 32896**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **3655**

**\$1,577.00**

**When was the debt incurred?** **Opened 03/08 Last Active 3/28/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Charge Account**

4.2  
0

**Verizon**

Nonpriority Creditor's Name

**Attn: Wireless Bankruptcy Admin**  
**500 Technology Dr Ste 500**  
**Weldon Springs, MO 63304**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **0005**

**\$509.00**

**When was the debt incurred?** **Opened 06/14 Last Active 9/30/15**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Phone Bill**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

4.2  
1

**Wells Fargo Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 6429  
Greenville, SC 29606**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **4164**

**\$10,673.00**

**When was the debt incurred?** **Opened 3/08/07 Last Active 8/09/16**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card**

4.2  
2

**Wells Fargo Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 6429  
Greenville, SC 29606**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **3196**

**\$4,806.00**

**When was the debt incurred?** **Opened 12/15 Last Active 4/04/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card**

4.2  
3

**Wells Fargo Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept  
Po Box 6429  
Greenville, SC 29606**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

Last 4 digits of account number **1740**

**\$801.00**

**When was the debt incurred?** **Opened 09/11 Last Active 3/25/18**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if know) **18-02131/hb**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**George J. Conits**  
**55 Beattie Place, Suite 700**  
**Greenville, SC 29601-2168**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <b>165,214.54</b>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <b>165,214.54</b>
Total claims from Part 2	6f. Student loans	6f.	\$ <b>0.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <b>0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <b>101,200.02</b>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <b>101,200.02</b>



**Fill in this information to identify your case:**

Debtor 1	<b>James Alvin Joseph</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Linda Joseph</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)	18-02131/hb		

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease <small>Name, Number, Street, City, State and ZIP Code</small>	State what the contract or lease is for
2.1	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.2	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.3	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.4	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.5	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	

**Fill in this information to identify your case:**

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No  
☐ Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

**3.1**

Name \_\_\_\_\_

Number Street State ZIP Code  
 City \_\_\_\_\_

☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

**3.2**

Name \_\_\_\_\_

Number Street State ZIP Code  
 City \_\_\_\_\_

☐ Schedule D, line \_\_\_\_\_  
☐ Schedule E/F, line \_\_\_\_\_  
☐ Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1 James Alvin Joseph

Debtor 2 Linda Joseph  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number 18-02131/hb  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<b>1. Fill in your employment information.</b>  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
	<b>Occupation</b>	<u>Nurse Anesthesia</u>	
	<b>Employer's name</b>	<u>Georgia Anesthesia Service, LLC</u>	
	<b>Employer's address</b>	<u>PO Box 914 Hartwell, GA 30643</u>	
	<b>How long employed there?</b>	<u>16 Years</u>	

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. <b>Estimate and list monthly overtime pay.</b>	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>0.00</b>	\$ <b>0.00</b>
5b. Mandatory contributions for retirement plans	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ <b>0.00</b>
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. Insurance	5e. \$ <b>0.00</b>	\$ <b>0.00</b>
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. Union dues	5g. \$ <b>0.00</b>	\$ <b>0.00</b>
5h. Other deductions. Specify:	5h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <b>0.00</b>	\$ <b>0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>15,967.62</b>	\$ <b>0.00</b>
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. Social Security	8e. \$ <b>1,999.00</b>	\$ <b>1,013.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ <b>0.00</b>	\$ <b>0.00</b>
8g. Pension or retirement income	8g. \$ <b>0.00</b>	\$ <b>0.00</b>
8h. Other monthly income. Specify:	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>17,966.62</b>	\$ <b>1,013.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>17,966.62</b> + \$ <b>1,013.00</b>	= \$ <b>18,979.62</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	<b>0.00</b>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	<b>18,979.62</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

**Combined monthly income**

Fill in this information to identify your case:

Debtor 1 James Alvin Joseph

Debtor 2 Linda Joseph  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number 18-02131/hb  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 2,240.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 500.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 366.00

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

<b>6. Utilities:</b>								
6a. Electricity, heat, natural gas	6a. \$	<u>1,005.47</u>						
6b. Water, sewer, garbage collection	6b. \$	<u>40.00</u>						
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>856.00</u>						
6d. Other. Specify: <u>cell phone</u>	6d. \$	<u>444.78</u>						
<b>7. Food and housekeeping supplies</b>	7. \$	<u>1,200.00</u>						
<b>8. Childcare and children's education costs</b>	8. \$	<u>0.00</u>						
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$	<u>200.00</u>						
<b>10. Personal care products and services</b>	10. \$	<u>200.00</u>						
<b>11. Medical and dental expenses</b>	11. \$	<u>215.08</u>						
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>500.00</u>						
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<u>200.00</u>						
<b>14. Charitable contributions and religious donations</b>	14. \$	<u>0.00</u>						
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.								
15a. Life insurance	15a. \$	<u>697.00</u>						
15b. Health insurance	15b. \$	<u>941.08</u>						
15c. Vehicle insurance	15c. \$	<u>446.00</u>						
15d. Other insurance. Specify: <u>prescriptions</u>	15d. \$	<u>1,128.85</u>						
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Vehicle Taxes</u>								
	16. \$	<u>80.00</u>						
<b>17. Installment or lease payments:</b>								
17a. Car payments for Vehicle 1	17a. \$	<u>490.00</u>						
17b. Car payments for Vehicle 2	17b. \$	<u>1,387.46</u>						
17c. Other. Specify: <u>current income taxes</u>	17c. \$	<u>3,100.00</u>						
17d. Other. Specify: <u>IRS &amp; DOR secured</u>	17d. \$	<u>1,500.00</u>						
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>								
	18. \$	<u>0.00</u>						
<b>19. Other payments you make to support others who do not live with you.</b>								
Specify:	19.	<u>\$ 0.00</u>						
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>								
20a. Mortgages on other property	20a. \$	<u>0.00</u>						
20b. Real estate taxes	20b. \$	<u>50.00</u>						
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>						
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>250.00</u>						
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>						
<b>21. Other:</b> Specify: <u>nursing board fees &amp; work related expenses</u>								
	21. +\$	<u>385.00</u>						
<b>IPTAY</b>	+\$	<u>550.00</u>						
<b>22. Calculate your monthly expenses</b>								
22a. Add lines 4 through 21.	<div style="border: 1px solid black; padding: 5px;"> <table border="0"> <tr> <td>\$</td> <td><u>18,972.72</u></td> </tr> <tr> <td>\$</td> <td></td> </tr> <tr> <td>\$</td> <td><u>18,972.72</u></td> </tr> </table> </div>		\$	<u>18,972.72</u>	\$		\$	<u>18,972.72</u>
\$			<u>18,972.72</u>					
\$								
\$	<u>18,972.72</u>							
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2								
22c. Add line 22a and 22b. The result is your monthly expenses.								
<b>23. Calculate your monthly net income.</b>								
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<u>18,979.62</u>						
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<u>18,972.72</u>						
<b>23c. Subtract your monthly expenses from your monthly income.</b> The result is your <i>monthly net income</i> .								
	23c. \$	<u>6.90</u>						
<b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?								
<input checked="" type="checkbox"/> No.								
<input type="checkbox"/> Yes. <span style="border: 1px solid black; padding: 2px;">Explain here: <b>must arrange workout payment with IRS &amp; DOR to prevent new levy</b></span>								

**Fill in this information to identify your case:**

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ James Alvin Joseph  
**James Alvin Joseph**  
Signature of Debtor 1

Date May 10, 2018

X /s/ Linda Joseph  
**Linda Joseph**  
Signature of Debtor 2

Date May 10, 2018

**Fill in this information to identify your case:**

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

**Official Form 107**

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

**1. What is your current marital status?**

- ☒ Married  
☐ Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- ☒ No  
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**Debtor 1 Prior Address:**

**Dates Debtor 1 lived there**

**Debtor 2 Prior Address:**

**Dates Debtor 2 lived there**

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.*)

- ☒ No  
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

**Part 2 Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☒ Yes. Fill in the details.

**From January 1 of current year until the date you filed for bankruptcy:**

**Debtor 1**

**Sources of income**  
 Check all that apply.

**Gross income**  
 (before deductions and exclusions)

- ☒ Wages, commissions, bonuses, tips  
☐ Operating a business

**\$63,870.48**

**Debtor 2**

**Sources of income**  
 Check all that apply.

**Gross income**  
 (before deductions and exclusions)

- ☐ Wages, commissions, bonuses, tips  
☐ Operating a business

**\$0.00**



Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>For last calendar year: (January 1 to December 31, 2017 )</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$221,764.94</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$0.00</b>
<b>For the calendar year before that: (January 1 to December 31, 2016 )</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$219,480.32</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$0.00</b>

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<b>Social Security</b>	<b>\$9,390.80</b>	<b>Social Security</b>	<b>\$4,052.00</b>
<b>For last calendar year: (January 1 to December 31, 2017 )</b>	<b>Social Security</b>	<b>\$28,172.40</b>	<b>Social Security</b>	<b>\$12,156.00</b>
<b>For the calendar year before that: (January 1 to December 31, 2016 )</b>	<b>Social Security</b>	<b>\$35,013.20</b>	<b>Social Security</b>	<b>\$12,156.00</b>

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- ☐ No. Go to line 7.  
☒ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.  
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
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Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
<b>Wells Fargo Home Mortgage</b> <b>Attn: Bankruptcy</b> <b>Mac X7801-014 3476 Stateview</b> <b>Blvd</b> <b>Fort Mill, SC 29715</b>	<b>2/2018, 3/2018,</b> <b>4/2018</b>	<b>\$6,713.76</b>	<b>\$251,122.00</b>	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__
<b>Nmac</b> <b>Attn: Bankruptcy</b> <b>Po Box 660360</b> <b>Dallas, TX 75266</b>	<b>2/2018, 3/2018,</b> <b>4/2018</b>	<b>\$1,470.00</b>	<b>\$21,108.00</b>	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__
<b>Nmac</b> <b>Attn: Bankruptcy</b> <b>Po Box 660360</b> <b>Dallas, TX 75266</b>	<b>6/2016</b>	<b>\$5,000.00</b>	<b>\$21,108.00</b>	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u><b>down payment</b></u>
<b>Amex</b> <b>Correspondence</b> <b>Po Box 981540</b> <b>El Paso, TX 79998</b>	<b>4/6/18, 4/10/18,</b> <b>3/12/18, 2/7/18</b>	<b>\$658.00</b>	<b>\$3,686.00</b>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__
<b>Bank of America</b> <b>4909 Savarese Circle</b> <b>FI1-908-01-50</b> <b>Tampa, FL 33634</b>	<b>4/10/18, 3/8/2018,</b> <b>2/8/2018,</b>	<b>\$840.00</b>	<b>\$7,756.00</b>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__
<b>First Citizens Bank</b> <b>100 E Tryon Rd</b> <b>Raleigh, NC 27603</b>	<b>4/10/2018,</b> <b>3/9/2018, 2/9/2018</b>	<b>\$1,500.00</b>	<b>\$20,226.00</b>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__
<b>Chase Card Services</b> <b>Correspondence Dept</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b>	<b>4/11/2018,</b> <b>3/13/2018,</b> <b>2/13/2018</b>	<b>\$1,050.00</b>	<b>\$6,198.00</b>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other__

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
<b>Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896</b>	<b>4/17/2018, 3/16/2018, 2/16/18</b>	<b>\$750.00</b>	<b>\$250.00</b>	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**  
*Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.*

- ☒ No  
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
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**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**  
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
<b>Unknown Plaintiff vs Unknown Defendant 1506707HEB</b>	<b>BankruptcyChapt er11</b>	<b>US BKPT CT SC COLUMBIA</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded  <b>Dismissed - 0.00</b>
<b>JAMES JOSEPH vs Unknown Defendant 1506707</b>	<b>Bankruptcy Chapter 11</b>	<b>SOUTH CAROLINA - SPARTANBURG</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded  <b>Dismissed - 0.00</b>
<b>County Of Hart vs JAMES JOSEPH BK38PG550</b>	<b>COUNTY TAX LIEN</b>	<b>HART COUNTY SUPERIOR COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded  <b>- 1,993.00</b>

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Case title Case number	Nature of the case	Court or agency	Status of the case
<b>Richardson Electric And Construc vs JAMES JOSEPH 14HV00731</b>	<b>CIVIL JUDGMENT</b>	<b>HABERSHAM COUNTY SUPERIOR COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 29,708.00</b>
<b>Citi Reo Holdings Inc vs JAMES JOSEPH 143476</b>	<b>CIVIL NEW FILING</b>	<b>HART COUNTY MAGISTRATE COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 0.00</b>
<b>County Of Hart vs JAMES JOSEPH BK30PG682</b>	<b>COUNTY TAX LIEN RELEASE</b>	<b>HART COUNTY SUPERIOR COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 984.00</b>
<b>Internal Revenue Service vs JAMES JOSEPH 201790001559</b>	<b>FEDERAL TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 82,395.00</b>
<b>State Of South Carolina vs JAMES JOSEPH, LINDA JOSEPH 51954715</b>	<b>STATE TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 9,070.00</b>
<b>State Of South Carolina vs JAMES JOSEPH 51954774</b>	<b>STATE TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 2,382.00</b>
<b>State Of South Carolina vs JAMES JOSEPH 51954775</b>	<b>STATE TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 2,476.00</b>
<b>State Of South Carolina vs JAMES JOSEPH 51954776</b>	<b>STATE TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 2,512.00</b>
<b>Internal Revenue Service vs JAMES JOSEPH, LINDA JOSEPH 201790001035</b>	<b>FEDERAL TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 82,395.00</b>

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Case title Case number	Nature of the case	Court or agency	Status of the case
State Of South Carolina vs JAMES JOSEPH 51952093	STATE TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 17,273.00</b>
State Of South Carolina vs JAMES JOSEPH 51952094	STATE TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 19,891.00</b>
State Of South Carolina vs JAMES JOSEPH 51951908	STATE TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 21,295.00</b>
Internal Revenue Service vs JAMES JOSEPH, LINDA JOSEPH 201590002284	FEDERAL TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 76,046.00</b>
Internal Revenue Service vs JAMES JOSEPH 201590001664	FEDERAL TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 428,737.00</b>
Internal Revenue Service vs JAMES JOSEPH BK2PG139	FEDERAL TAX LIEN	HART COUNTY SUPERIOR COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 761,048.00</b>
Internal Revenue Service vs JAMES JOSEPH 20122721	FEDERAL TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 288,842.00</b>
State Of South Carolina vs JAMES JOSEPH 51368870	STATE TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 7,547.00</b>
Unknown Plaintiff vs LINDA JOSEPH, JAMES JOSEPH 201790001035	FEDERAL TAX LIEN	GREENWOOD COUNTY CLERK OF COURT	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded <b>- 82,395.00</b>

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Case title Case number	Nature of the case	Court or agency	Status of the case
<b>Unknown Plaintiff vs LINDA JOSEPH, JAMES JOSEPH 201590002284</b>	<b>FEDERAL TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded  <b>- 76,046.00</b>
<b>Unknown Plaintiff vs LINDA JOSEPH, JAMES JOSEPH 51954715</b>	<b>STATE TAX LIEN</b>	<b>GREENWOOD COUNTY CLERK OF COURT</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded  <b>- 9,070.00</b>

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- ☐ No. Go to line 11.  
☒ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
<b>IRS PO Box 7346 Philadelphia, PA 19101-7346</b>	<b>income</b> <b>*action was stayed</b>  <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input checked="" type="checkbox"/> Property was attached, seized or levied.	<b>4/27/2018</b>	<b>\$0.00</b>
<b>SC DEPT OF REVENUE PO BOX 12265 COLUMBIA, SC 29211</b>	<b>income</b> <b>*summons to appear with records - action stayed</b>  <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.	<b>4/27/2018</b>	<b>\$0.00</b>

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☐ No

☒ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss <small>Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i>.</small>	Date of your loss	Value of property lost
2005 Ford Escape - tree fell on vehicle & insurance company totalled it	\$5,000 (used as down payment on 2018 Nissan Rogue)	6/2017	\$5,500.00
residence - hurricane damaged roof	\$2000 deductible insurance paid \$43,000, which went to roofers	11/2017	Unknown

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Alecia Compton Law Office, LLC 109 Oak Avenue Suite A Greenwood, SC 29646 alecia@aleciacomptonlawoffice.com	Attorney Fees, Filing Fee, Credit Report Fee	4/26/18	\$4,400.00
MoneySharp	Credit Counseling	4/26/18	\$10.00

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**  
Do not include any payment or transfer that you listed on line 16.

- ☐ No  
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**  
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No  
☐ Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

- ☐ No  
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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**Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**  
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No  
☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- ☐ No  
☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. **Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☐ No  
☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	--------------------------



Debtor 1 James Alvin Joseph  
Debtor 2 Linda Joseph

Case number (if known) 18-02131/hb

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No  
☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	--	-----------------------	-------

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- ☐ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☐ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☐ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☐ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

25. Have you notified any governmental unit of any release of hazardous material?

- ☐ No  
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No  
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
Nurse Anesthesia 4523 Highway 246 North Hodges, SC 29653	Nurse Anesthetist  John Ecton	EIN: 4382 From-To 20 years
Georgia Anesthesia Services, LLC PO Box 914 Hartwell, GA 30643	Anesthesia  John Ecton	EIN: 04-03614160 From-To 15 years

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ James Alvin Joseph  
James Alvin Joseph  
Signature of Debtor 1

/s/ Linda Joseph  
Linda Joseph  
Signature of Debtor 2

Date May 10, 2018

Date May 10, 2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 **James Alvin Joseph**  
First Name Middle Name Last Name

Debtor 2 **Linda Joseph**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number **18-02131/hb**  
(if known)

☐ Check if this is an amended filing

## Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Nmac</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: <b>2018 Nissan Rogue</b>		
Creditor's name: <b>Synchrony Bank/Lending Inc</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: <b>Retain &amp; make payments</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>2005 Alfa See-Ya M-40FD 350hp</b>		
Creditor's name: <b>Wells Fargo Bank NA</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>4523 Hwy 246 North Hodges, SC 29653 Greenwood County</b>		

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

securing debt:

**Retain & make payments**

Creditor's **Wells Fargo Bank NA**  
name:

Description of **101 Joy O Hartwell, GA 30643**  
property **Hart County**  
securing debt: **Ross Wylie SD LT E PB 31-45**  
**Lt. 2.45**

- ☒ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a  
*Reaffirmation Agreement.*  
☐ Retain the property and [explain]:

☒ No  
☐ Yes

Creditor's **Wells Fargo Home Mortgage**  
name:

Description of **4523 Hwy 246 North Hodges,**  
property **SC 29653 Greenwood County**  
securing debt:

- ☐ Surrender the property.  
☐ Retain the property and redeem it.  
☐ Retain the property and enter into a  
*Reaffirmation Agreement.*  
☒ Retain the property and [explain]:  
**Retain & make payments**

☒ No  
☐ Yes

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

Lessor's name:  
Description of leased  
Property:

☐ No  
☐ Yes

**Part 3: Sign Below**

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X **/s/ James Alvin Joseph**

**James Alvin Joseph**

Signature of Debtor 1

X **/s/ Linda Joseph**

**Linda Joseph**

Signature of Debtor 2

Date **May 10, 2018**

Date **May 10, 2018**

Fill in this information to identify your case:

Debtor 1 James Alvin Joseph

Debtor 2 Linda Joseph  
(Spouse, if filing)

United States Bankruptcy Court for the: District of South Carolina

Case number 18-02131/hb  
(if known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. You and your spouse are:
- ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ _____	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ _____	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ _____	\$ _____
5. Net income from operating a business, profession, or farm	<div style="text-align: right;">Debtor 1</div> Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses -\$ _____ Net monthly income from a business, profession, or farm \$ _____ Copy here -> \$ _____	
6. Net income from rental and other real property	<div style="text-align: right;">Debtor 1</div> Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses -\$ _____ Net monthly income from rental or other real property \$ _____ Copy here -> \$ _____	
7. Interest, dividends, and royalties	\$ _____	\$ _____

Debtor 1 **James Alvin Joseph**  
Debtor 2 **Linda Joseph**

Case number (if known) **18-02131/hb**

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<b>8. Unemployment compensation</b> Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you _____ \$ _____ For your spouse _____ \$ _____	\$ _____	\$ _____
<b>9. Pension or retirement income.</b> Do not include any amount received that was a benefit under the Social Security Act.	\$ _____	\$ _____
<b>10. Income from all other sources not listed above.</b> Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. _____ \$ _____ _____ \$ _____ Total amounts from separate pages, if any. + \$ _____	\$ _____ \$ _____ + \$ _____	\$ _____ \$ _____ \$ _____
<b>11. Calculate your total current monthly income.</b> Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ _____	+ \$ _____ = \$ _____ <div style="text-align: right; font-size: small;">Total current monthly income</div>

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11 \_\_\_\_\_ **Copy line 11 here=>** \$ \_\_\_\_\_

Multiply by 12 (the number of months in a year) **x 12**

12b. The result is your annual income for this part of the form 12b. \$ \_\_\_\_\_

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

Fill in the number of people in your household.

Fill in the median family income for your state and size of household. \_\_\_\_\_ 13. \$ \_\_\_\_\_

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ James Alvin Joseph**  
**James Alvin Joseph**  
Signature of Debtor 1

**X /s/ Linda Joseph**  
**Linda Joseph**  
Signature of Debtor 2

Date **May 10, 2018**  
MM / DD / YYYY

Date **May 10, 2018**  
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1 James Alvin Joseph

Debtor 2 Linda Joseph  
(Spouse, if filing)

United States Bankruptcy Court for the: District of South Carolina

Case number 18-02131/hb  
(if known)

☐ Check if this is an amended filing

## Official Form 122A - 1Supp

### Statement of Exemption from Presumption of Abuse Under § 707(b)(2)

12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

#### Part 1 Identify the Kind of Debts You Have

1. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 1).

- ☒ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- ☐ Yes. Go to Part 2.

#### Part 2: Determine Whether Military Service Provisions Apply to You

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?

- ☐ No. Go to line 3.
- ☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Go to line 3.
- ☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- ☐ No. Complete Form 122A-1. Do not submit this supplement.
- ☐ Yes. Check any one of the following categories that applies:
- ☐ I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.
  - ☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.
  - ☐ I am performing a homeland defense activity for at least 90 days.
  - ☐ I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.



B2030 (Form 2030) (12/15)

**United States Bankruptcy Court  
District of South Carolina**

In re **James Alvin Joseph  
Linda Joseph**

Debtor(s)

Case No. **18-02131/hb**  
Chapter **7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>4,000.00</b>
Prior to the filing of this statement I have received .....	\$	<b>4,000.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**May 10, 2018**

*Date*

**/s/ Alecia T. Compton**

**Alecia T. Compton**

*Signature of Attorney*

**Alecia Compton Law Office, LLC**

**109 Oak Avenue**

**Suite A**

**Greenwood, SC 29646**

**(864) 450-9042 Fax: (864) 450-9046**

**alecia@aleciacomptonlawoffice.com**

*Name of law firm*